DECLARATION AND POWER OF ATTORNEY FOR PATENT APPLICATION

ALTERNATING VOIDED AREAS OF ANTI-PADS

() was filed on

Number

ATTORNEY DOCKET NO. 200308576-1

As a below named inventor, I hereby declare that:

My residence/post office address and citizenship are as stated below next to my name;

the specification of which is attached hereto unless the following box is checked:

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

I hereby state that I have reviewed and understood the contents of the above-identified specification,

and was amended on

as US Application No. or PCT International Application

	ofits under Title 35, United State	es Code Section 119 of	any foreign application(s) for patent r patent or inventor(s) certificate havi
filing date before that of the appli	cation on which priority is claim	ed:	
COUNTRY	APPLICATION NUMBER	DATE FILED	PRIORITY CLAIMED UNDER 35 U.S.C. 119
	·		YES: NO:
	<u> </u>		YES: NO:
rovisional Application hereby claim the benefit under Ti elow:	tle 35, United States Code Sect	ion 119(e) of any Unite	d States provisional application(s) list
· -	APPLICATION NUMBER	FILING DATE	
	VELETICA LION HONDEN		-
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plication and the national or PCT APPLICATION NUMBER	International filing date of this ap	,	(patented/pending/abandoned)
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DECLARATION AND POWER OF ATTORNEY FOR PATENT APPLICATION (continued)

ATTL LEY DOCKET NO. 200308576-1.

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Inventor's Signature		Date			
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Post Office Address:	Same as above	·			
n has here	lin Sole_		7/15/2003		
Inventor's Signature		Date			
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Full Name of # 4 joint inventor:			Citizenship:		
Residence:	<u> </u>				
Post Office Address:					
Inventor's Signature		Date			
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Full Name of # 5 joint inventor:			Citizenship:		
Residence:					
Post Office Address:					
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Inventor's Signature		Date			
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Full Name of # 6 joint inventor		•	Citizenship:		
Residence:					
Post Office Address:					
Inventor's Signature		Date			
Full Name of # 7 joint inventor			Citizenship:		
Residence:					
Post Office Address:		•			
Inventor's Signature		Date			
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Full Name of # 8 joint inventor			Citizenship:		
Residence:		·			
Post Office Address:					
Inventor's Signature		Date			